

PART B—ISSUE FEE TRANSMITTAL

540-4451, W
561 - 30, W

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1. CORRESPONDENCE ADDRESS

F3M1/0203

TERRANCE A MEADOR
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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code Publishing Division

CO-INVENTOR'S NAME

MAR 07 1997

Street Address

City, State and Zip Code

06

Check if additional changes are enclosed

RECEIVED

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/419,719	04/10/95	010	GRAHAM, M	3304 02/03/97
First Named Applicant	AUGUSTINE,		SCOTT D.	

TITLE OF INVENTION INFLATABLE LOWER BODY THERMAL BLANKET

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 1342-119	607-107.000	J14	UTILITY	YES	\$645.00	05/05/97

3. Correspondence address change (Complete only if there is a change)

Terrance A. Meador, Esq.
BAKER, MAXHAM, JESTER & MEADOR
Symphony Towers
750 "B" Street, Suite 3100
San Diego, CA 92101

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

- 1 BAKER, MAXHAM,
2 JESTER & MEADOR
3 _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

AUGUSTINE MEDICAL, INC.

(2) ADDRESS: (CITY & STATE OR COUNTRY):

Eden Prairie, Minnesota

A This application is NOT assigned.

Assignment previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

Issue Fee Advance Order - # of Copies TEN (10)

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Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *Terrance A. Meador* (Date) *3/4/97*
TERRANCE A. MEADOR

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Certificate of Mailing

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Box ISSUE FEE

Assistant Commissioner for Patents
Washington, D.C. 20231

810 BL 03/24/97 08419719
1 242 645.00 CK
1 561 30.00 CK

on: March 4, 1997

(Date)

TERRANCE A. MEADOR

(Name of person making deposit)

Terrance A. Meador

(Signature)

March 4, 1997

(Date)